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Annual ministerial review: implementing the internationally agreed goals and commitments in regard to gender equality and empowerment of women

Statement submitted by Imamia Medics International, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 30 and 31 of Economic and Social Council resolution 1996/31.

* E/2010/100.

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Statement

Gender equality and health

Imamia Medics International, a non-governmental organization in special consultative status with the Economic and Social Council, is committed to improving access to quality health care and enhancing disease prevention globally. Disparities between men and women in health status and health-care access are products of gender inequality. As such, Imamia Medics International encourages the Council to examine the relationship between health and gender while addressing the theme of the 2010 annual ministerial review: "Implementing the internationally agreed goals and commitments in regards to gender equality and empowerment of women".

Maternal mortality is the most striking inequality in public health. The international community agreed to address this issue through Goal 5 of the Millennium Development Goals, with a three-quarter reduction of the maternal mortality ratio between 1990 and 2015. States were tasked with an annual reduction of 5.5 per cent; however, with the current rate of progress much lower than that, the world will fall considerably short of the target. According to the *Millennium Development Goals Report 2009*, between 1990 and 2005, sub-Saharan Africa and Southern Asia account for 85 per cent of all maternal deaths, with half of all maternal deaths (265,000) occurring in sub-Saharan Africa and another third (187,000) in Southern Asia. Yet, States in sub-Saharan Africa and Southern Asia have demonstrated a deterioration or no progress regarding maternal mortality.

As recognized at the annual ministerial review regional preparatory meeting on women and health, the causes of maternal mortality and morbidity are well-known, as are the interventions to combat them. Most maternal deaths occur during or shortly after childbirth, and almost all are preventable if women are assisted at the time by a health-care professional with the necessary skills, equipment and medicines to prevent and manage complications. Appropriate care is often of poor-quality, unavailable, inaccessible or unused. In addition to the lack of money or proximity to health facilities hindering women's access to health care, services are often unused or inaccessible due to social inequities: a woman may be unable to receive treatment because community norms prevent her from travelling alone to a clinic. Care may also be inaccessible if a woman feels uncomfortable, or social norms prevent her from receiving treatment from males. Successful strategies to improve maternal health must be comprehensive, addressing not only the need to improve the quality of care but also the geographic, financial and cultural barriers.

Imamia Medics International therefore encourages potential partnerships on projects like our Binte Khadija maternity home project in Pakistan and recommends that agencies, donors and Governments:

- Provide sufficient financing to strengthen health systems, particularly for maternal, childcare and reproductive health services
- Establish programmes to reduce maternal mortality and ensure universal access to reproductive health care, including in remote areas

- Provide trained health workers, including skilled females, during/after pregnancy and childbirth for delivery of quality antenatal care, timely emergency obstetric services and contraception
- Adopt and implement policies that protect poor families from the consequences of unaffordable maternity care, including through access to free services
- Work with community-based health-care projects, educate women and their communities about health promotion and disease prevention and involve men in maternal health and wider reproductive health matters.